

00862.002936.

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Technology Center 2600

PATENT APPLICATION

ED
#10/B
7/23/02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
MANABU OHGA) Examiner: A. Bhatnagar
Application No.: 09/358,408) Group Art Unit: 2623
Filed: July 22, 1999)
For: IMAGE PROCESSING)
APPARATUS AND METHOD : July 11, 2002

Commissioner for Patents
Washington, D.C. 20231

AMENDMENT

Sir:

In response to the Office Action dated April 11, 2002, please amend the
above-identified application as follows:

IN THE CLAIMS:

Please amend Claims 1, 4-6, 8, 10-18 and 20 to read as follows. A version
of those claims, marked to show the changes, is appended.

I hereby certify that this correspondence is being deposited with the
United States Postal Service as first-class mail in an envelope addressed
to: Commissioner for Patents, Washington, D.C. 20231 on
July 11, 2002.

(Date of Deposit)

Leonard P. Diana

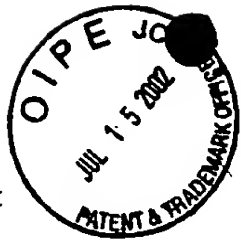
(Name of Attorney for Applicant)

Leonard P. Diana

July 11, 2002

Signature

Date of Signature



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In re Application of:

Docket No. 00862.002936.

Technology Center 2600

MANABU OHGA

Application No.: 09/358,408

Examiner: A. Bhatnagar

Filed: July 22, 1999

Group Art Unit: 2623

For: IMAGE PROCESSING APPARATUS
AND METHOD

Date: July 11, 2002

COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|----------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 21 | MINUS | ** 21 | = 0 | x \$9 \$18 | \$0 |
| INDEP. CLAIMS | * 6 | MINUS | *** 6 | = 0 | x \$42 \$84 | \$0 |
| Fee for Multiple Dependent claims \$140°/\$280 | | | | | | \$0 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--- | | | | | | \$0 |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a ____-month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,

Zel P. Diana
Attorney for Applicant

Registration No. 28,296

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